

CHANGE OF ADDRESS OR NAME

(For use by current registered voter)

| | | | |
|--|---------------|--------------|------------------------------|
| Last 4 digits of Social Security No. _ _ _ _ | Date of Birth | Phone Number | |
| Last Name | First Name | Middle Name | Suffix (Sr., Jr., III, etc.) |
| Resident Address | Street Name | Community | Zip Code |
| Mailing Address (If different from resident address above) | | | Zip Code |
| Former Last Name (If name has changed) | | | |
| Signature of Voter | | | Date |
| Knowingly giving any untrue information in this document is a felony under Virginia law. The punishment is a maximum fine of \$2,500 and/or confinement for up to ten years. You also lose your right to vote. Your social security number is part of your voter record and is requested to assure that no other person is permitted to change your record or vote in your name. This document is available for public inspection only under order of a court. | | | |

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